		2007					I Income					MONTA Form 2	NA
		For th		1 – Dec 31, 20	07 or the tax y		-	,200	7, ending		20		
		Check here if this is an Amended	Your first name and initial			Last n	Last name			your s	ocial secu	urity number	
		Return.	Spouse's f	irst name and ir	nitial	Last n	ame		Decease	Spous	e's social	security num	ıber
		☐ Check here if this is a NOL Carryback.	Mailing add	dress			Ci	ty		Stat	ie	Zip+4	\exists
			□ Single	2 [■ Married filin	a jointly	32	□ Marriad	filing separat	oly on th	o samo fo	ırm	
				filing separatel				■ Married	i lilling separat I filing separat I's SSN	-			
		4.		f household				0,000					
		Residency Status											
		5a. Resident fu	-	5b. 🗖 Nonr	esident full yea	ar			Column A (fo	r single,	Column	B (for spouse	•]
		5c. ☐ Resident pa	art-year	Oato of change	State move	d to	State moved fro	_ m	joint, separ head of hou			ng separately	
	62	Date of change State moved to State moved from								<u>senola)</u>	using till	ng status 3a)	
		Yourself Go 65 or older Blind Enter number checked											١.,
S		•	65 or olde			nber ch	ecked				<u></u>		_ 6b
ţi	6c.	Dependent's first na	ame	Last name	SSN		Relationship	Disabled					
π													
Exemptions													
ш	I	If additional depen	dente ee	inetructions (n nage 8			60]6c.
		Add lines 6a thru 6			. •						+		-16d
		Enter amounts co							no entry les	ve hlar	ık ık		٦٥۵
		Wages, salaries, ti							io citti y, ice	ive biai	T .		٦,
		Taxable interest. A									├──		∐7. 8a
		Tax-exempt interest.					B:	8b.					Joa
		Ordinary dividends				ed					Т]9a
		Qualified dividends					B:	9b.					
		Taxable refunds, c				come ta	axes	10.			Τ		710
ne		Alimony received.											<u>]</u> 11.
S		Business income of						12.]12
드		Capital gain or (loss.) Attach federal Schedule D if required									—		13
era		Other gains or (los					_				—		14
Federal Income		IRA distributions			B: B:		Taxable am				+		15 16
ш.	16a. Pensions and annuities .16a. A: B: Taxable amount 16b. 17. Rental real estate, royalties, partnerships, S corporations, trust. Attach federal Schedule E17.											17	
		Farm income or (lo									+		18
		Unemployment cor	•								<u> </u>		19
	20a.	Social security ben	efits. 20a.	A:	B:		Taxable am					20	
		Other income. List			21.								21
		Add the amounts in									<u> </u>		22
		Educator expenses									——		23
a.		Certain business e Health savings acc	•								+		24 25
mc		Moving expenses.									+		125. 26.
ss Income		9 1				 		27					
		7. One-half of self-employment tax. Attach federal Schedule SE B. Self-employed SEP, SIMPLE, and qualified plans									†		28
Gross		Self-employed hea											29
Federal Adjusted	30.	Penalty on early w	ithdrawal o	of savings									30
		Alimony paid. 31b.	•					31a.					31
		IRA deduction									ـــــــ		32
		Student loan intere									₩		33
		Tuition and fees de									+		34 35
		Domestic production activities deduction. Attach federal Form 8903									+		35 36
		Add lines 23 through 35 and enter the result here. Federal write-ins									+		36 37
		Subtract line 36 from line 22 and enter result here							d aross inco	me 37a	+		37 37
		Enter Montana add							g. 033 III00	. . 51 a.	1		۱۳٬
AGI		Attach Form 2, pag											38
Montana	39.	Enter Montana sub	tractions t	from federal A	GI from Form	1 2, pag	ge 4, Schedule	e II, line			T T		1
ont		35. Attach Form 2,	page 4, S	chedule II				39.					39
ĭ	40.	Add lines 37 and 38;	subtract lin	e 39. This is yo	our Montana a	djuste	d gross incom	e. 40.					40

F	orm 2	, Page 2 - 2007 Social Security Number:	Column A (for single, joint, separate, or	Column B (for spouse when filing separately						
			head of household)	using filing status 3a)						
	41.	Montana adjusted gross income from line 4041.	,		41.					
4		Deductions Check only one								
Taxable Income	42.	(A) Standard Deduction (see Worksheet V on page 39) (A) □								
ည		(B) Itemized Deductions from Form 2, Schedule III, line 33. (B) 42.			42.					
=	43	Subtract line 42 from line 41 and enter the result here			43.					
ğ	70.	Exemptions (all individuals are entitled to at least one exemption.)	<u> </u>	- 5.						
Xa	11	Multiply \$2,040 by the number of exemptions on line 6d and enter result here 44.		44.						
19		Subtract line 44 from line 43 and enter the result here. If zero or less, enter zero.		+	44.					
	45.	This is your taxable income			45.					
	46	Tax from the tax table on page 11. If line 45 is zero, enter zero			46.					
		2% capital gains tax credit			47.					
		Subtract line 47 from line 46 and enter the result here, but not less than zero. This	+	47.						
J	40.	is your resident tax after capital gains tax credit		48.						
Тах	48a	Nonresident, part-year resident tax after capital gains tax credit. Enter here the	 	- 0.						
	iou.	amount from Form 2, Schedule IV, line 21, but not less than zero		48a.						
	49	Tax on lump-sum distributions. See instructions. Attach federal Form 4972 49.			49.					
		Add lines 48 or 48a and 49 and enter the result here. This is your total tax. 50.		50.						
		_			51.					
Credits		51. Nonrefundable single-year credits from Form 2, Schedule V, line 13 51. 52. Nonrefundable carryover credits from Form 2, Schedule V, line 27 52.								
jed		Add lines 51 and 52 and enter the result here but do not enter an amount larger		 	52.					
		than the amount on line 50. This is your total nonrefundable credits. 53.			53.					
Recapture Taxes	54	Family education savings account recapture tax			54.					
tt S	5 7 .	Endowment credit recapture tax			55.					
a ab	55.	Rural physician's credit recapture tax			56.					
ခွဲ့ မ	50.	·······································								
	57.	Add lines 54 through 56 and enter result here. This is your total recapture tax. 57. Add lines 50 and 57 and then subtract from this total the amount on line 53 and		 	57.					
Tax	56.	enter the result here. This is your 2007 tax liability.			58.					
•	50	Montana income tax withheld. Attach federal Form(s) W-2 and 1099			59.					
ב ל	60	· · ·								
e a	00.	2007 estimated tax payments and amount applied from your 2006 return 60.			60.					
멸	61.	2007 extension payments from Form EXT-07			61.					
Payments and Refundable	62.	Refundable credits from Form 2, Schedule V, line 33			62.					
돌器	63.	Add lines 59 through 62 and enter the result here. This is your total payments and refundable credits			63.					
<u>α</u>	64	Subtract line 63 from line 58. This is your net tax due or <overpayment> 64.</overpayment>			64.					
		Combine the amounts on line 64 columns A and B and enter the result here	65		65.					
and		Interest on underpayment of estimated taxes. (See instructions on page 12.)			66.					
		Late file, late payment penalties and interest. (See instructions and worksheet on page 12.)			67.					
v, –			• '		68.					
늁듗	00.	Other penalties. (See instructions on page 13.)	68.		00.					
듣	69.	Enter in boxes 69a through 69d your voluntary check-off contributions. Nongame wildlife Child abuse Agriculture in End-stage renal	le							
es		Nongame wildlife	Enter the sum of							
픑응			69a through 69d		60					
Penalties, Intere Contributior	70	69a. 69b. 69c. 69d. Add the amounts on lines 66, 67, 68, and 69 and enter the result here. This is the s	here69.		69.					
Δ.	70.	total penalties, interest and contributions.			70.					
d)	71.	If the amount on line 65 is a net tax due, add lines 65 and 70 and enter the result he	ere. This	+						
ع چ		is the amount you owe.	71.		71.					
تَّ تُ		Visit our website at mt.gov/revenue to pay by credit card or E-check, or make a che	ck payable to							
<u>چ</u> چ		MONTANA DEPARTMENT OF REVENUE.								
ヹ゙゙゙゙゙゙゙゙゙゙゙	72.	If the amount on line 65 is an overpayment, reduce the overpayment by the amount								
Amount You Owe or Your Refund		on line 70 and enter the result here as a positive number	72.		72.					
E P	<i>1</i> 3.	Enter the amount on line 72 that you want applied to your 2008 estimated tax			73.					
4	74.	Subtract line 73 from line 72 and enter the amount here. This is your refund.	74.		74.					
		If you wish to use direct deposit, enter your RTN# and ACCT# below.		☐ Checking						
		RTN# ACCT# ACCT#								
_				Savings						
	П	If applicable, check appropriate box. Name, address and telephone number of paid preparations are as income.	arer.	Check this box and a						
		2/3rd farming gross income Annualized estimated payments		a copy of your federa Form 4868 to receive						
		Do not mail 2008 forms and instructions SSN, FEIN or PTIN:		Montana extension.	, you					
		he DOR discuss this return with your tax preparer? Yes No Questions? Call (406) 444-	-6900 or TDD (406) 44		ired.					
			(,	 						
	<u>X</u>	X								
		Your signature is required Date Daytime telephone number	Spouse's signature	Date						